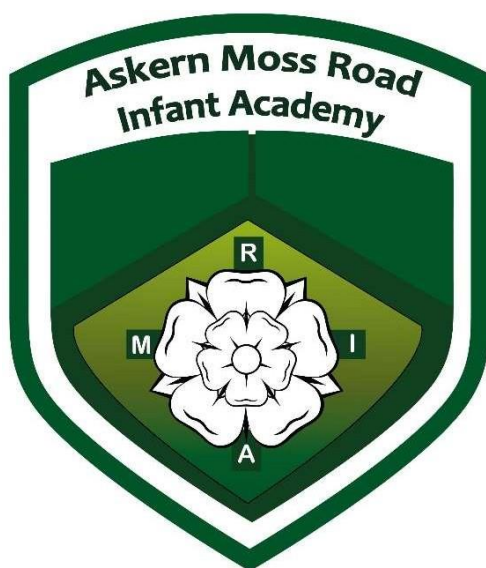


Moss Road Infant Academy



FIRST AID POLICY

VERSION	AUTHOR	SUMMARY OF CHANGES	DATE PUBLISHED	DATE OF REVIEW
1.1	CAT	Section 6 and Section 8: Key personnel identified.	June 2023	Sep 2024
1.2	CAT	Section 9- Reporting Arrangements- revised wording	Sep 2024	Sep 2025
3.1	MH	Appendix Additions in line with new EYFS Statutory Framework September 2025	September 2025	Sept 2026
4.0	MH	Section 12 - ALLERGIC REACTIONS AND ANAPHYLAXIS	September 2026	Sept 2027

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1. DEFINITION OF FIRST AID

First Aid is the initial or immediate assistance given to someone who has been injured or taken ill before the arrival of qualified medical assistance (if this is required).

2. STATEMENT OF INTENT

First Aid can save lives and prevent minor injuries becoming major ones. At Askern Moss Road Infant Academy, we acknowledge the importance of providing First Aid for employees, children and visitors within the school. The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by the school in regards to all staff, pupils and visitors.

Under health and safety legislation, employers have to ensure that there are adequate and appropriate equipment, facilities and personnel for providing First Aid in the workplace, and for ensuring that the correct procedures are in place. This is the overall responsibility of the Head Teacher, in conjunction with the School Business Manager.

Askern Moss Road Infant Academy will take every reasonable precaution to ensure the safety and wellbeing of all staff and pupils. Details of such precautions are described in the following policies:

- Health & Safety policy
- Behaviour policy
- Child Protection and Safeguarding Policy
- Educational Visits Policy
- Managing Medical Conditions Policy

3. ROLES AND RESPONSIBILITIES

This policy has due regard to statutory legislation, including, but not limited to the following: The Health and Safety (First Aid) Regulations 1981 and approved code of practice and guidance Health and Safety at Work etc. Act 1974 and subsequent regulations and guidance

Leger Education Trust:

- Health and Safety legislation places duties on Leger Education Trust for the health and safety of school staff, children and anyone else on the premises.
- The Trust is responsible, under the Health and Safety at Work Act 1974, for ensuring that a school has a Health and Safety policy which includes arrangements for First Aid.

The Governing Body:

- The Governing Body has a general responsibility for all the school policies, including Health & Safety and First Aid.
- The Governing Body must follow the Health & Safety procedures produced by the Trust.
- The Governing Body delegates the day to day functions of managing health and safety to the Head Teacher.

The Head Teacher:

- The Head Teacher is responsible for putting policy into practice and for developing more detailed procedures.
- The Head Teacher will make this policy available to parents on the school website, together with the other policies referred to within this document.

Teachers and other staff

- All adults will be expected to be responsible for the welfare of all children
- The school will ensure that newly appointed members of staff will receive appropriate training and guidance.

4. AIMS

1. All staff should read and be aware of this policy, know who to contact in the event of any illness, accident or injury, and ensure this policy is followed in relation to the administration of first aid.
2. All staff will use their best endeavours, at all times, to secure the welfare of the pupils.
3. Anyone on the school premises is expected to take reasonable care for their own and others' safety.
4. The aim of this policy is to:
 - Ensure that the school has adequate, safe and effective first aid provision in order for every pupil, member of staff and visitor to be well looked after in the event of any illness, accident or injury; no matter how major or minor.
 - Ensure that all staff and pupils are aware of the procedures in the event of any illness, accident or injury.
 - Ensure that medicines are only administered at the school when express permission has been granted for this and they are prescribed.
 - Ensure that all medicines are appropriately stored.
 - Promote effective infection control
5. Nothing in this policy should affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 for the emergency services in the event of a medical emergency before implementing the terms of this policy, and make clear arrangements for liaison with ambulance services on the school site.

5. MATERIALS, EQUIPMENT AND FACILITIES

Trained First aiders are responsible for examining the contents of first aid boxes. These should be checked monthly and restocked as soon as possible after use. Items should be discarded safely after the expiry date has passed.

All first-aid containers must be marked with a white cross on a green background.

Minimum contents for First Aid containers:

- A guidance leaflet
- 20 adhesive dressings (individually wrapped and assorted sizes)
- 2 sterile eye pads
- 6 triangular bandages (individually wrapped and sterile)
- 6 medium sterile wound dressings (individually wrapped and unmedicated)
- 2 large sterile wound dressings (individually wrapped and unmedicated)
- 6 safety pins
- Disposable gloves

Travel first aid packs, for use on school trips, should include:

- A guidance leaflet
- 6 adhesive dressings (individually wrapped and assorted sizes)
- 1 sterile eye pad

- 1 triangular bandage (individually wrapped and sterile)
- 1 medium sterile wound dressing (individually wrapped and unmedicated)
- 1 large sterile wound dressings (individually wrapped and unmedicated)
- 2 safety pins
- Disposable gloves

There should be extra stock in the school. Items should be discarded safely after the expiry date has passed.

No creams, lotions, potions, medicines or tablets are permitted.

6. FIRST AIDERS

- The main duties of first aiders are to give immediate first aid to pupils, staff or visitors and to ensure that an ambulance or other professional medical help is called, when necessary.
- First aiders are to ensure that their first aid certificates are kept up-to-date through liaison with the School Business Manager
- First aiders have a responsibility to ensure all first aid kits are properly stocked and maintained.
- The main first aid appointed person (Office Admin Assistant, Mrs Nina Tinsley) will be responsible for maintaining supplies.
- The Executive Head Teacher will ensure that staff (including midday supervisors) renew their First Aid training every 3 years.
- The school will maintain a record of First Aid training and dates.
- Paediatric First Aid qualifications will be held by members of the EYFS team.
- First aid provision will be available at all times whilst people are on the school premises; also when off-site on school visits.

7. FIRST AID DUTIES AND EMERGENCY PROCEDURES IN THE EVENT OF AN ACCIDENT, ILLNESS OR INJURY

- During the school day, First Aid will be administered by all qualified support staff within school.
- The main role of staff is to give help with common injuries and illnesses, and those arising from specific hazards at school.
- Our First Aid Room should be used for the administration of First Aid.
- All staff must follow basic hygiene procedures and take precautions to avoid infection.
- Staff must use disposable gloves when dealing with bodily fluids and disposing of dressings and equipment.

8. EMERGENCY PROCEDURES IN THE EVENT OF AN ACCIDENT, ILLNESS OR INJURY

If an accident, illness or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate course of action, which may involve calling for an ambulance immediately or calling for a first aider.

If called, a first aider will assess the situation and take charge of first aid administration.

In the event that the first aider does not consider that he/she can adequately deal with the presenting condition by the administration of first aid, then he/she should arrange for the injured person to access appropriate medical treatment without delay.

Where an initial assessment by the first aider indicates a moderate to serious injury has been sustained, one or more of the following actions will be taken:

- Administer emergency help and first aid to all injured persons. The purpose of this is to keep the accident victim(s) alive and, if possible, comfortable, before professional medical help can be called. Also, in some situations, action now can prevent the accident from getting more serious, or from involving more victims
- Call an ambulance or a doctor, if this is appropriate – after receiving a parent's clear instruction, take the accident victim(s) to a doctor or to a hospital. Moving the victim(s) to medical help is only advisable if the person doing the moving has sufficient knowledge and skill to make the move without making the injury worse.
- Make sure that no further injury can result from the accident, either by making the scene of the accident safe, or (if they are fit to be moved) by removing injured persons from the scene.
- See to any children who may have witnessed the accident or its aftermath and who may be worried, or traumatised, in spite of not being directly involved. They will need to be taken away from the accident scene and comforted. Younger or more vulnerable children may need parental support to be called immediately.

When the above action has been taken, the incident must be reported to:

- The School Business Manager
- The Executive Head Teacher or Deputy Head Teacher in the event of the Executive Head's absence from school.
- The parents/carers of the injured person(s)

9. REPORTING ARRANGEMENTS

In the event of incident or injury to a pupil, at least one of the pupil's parents must be informed as soon as practicable.

All Head Injuries no matter how minor in addition to being recorded on Medical Tracker, parents/carers will also be issued with NHS Guidance for Head Injuries (Appendix 1).

In the event of serious injury or an incident requiring emergency medical treatment, the school will telephone the pupil's parents as soon as possible. A list of emergency contact details is kept at reception/admin office.

All first-aid incidents should be recorded on Medical Tracker and emailed to the parents. Wherever possible staff should speak to the parent/carers concerned when the child is collected.



10. EDUCATIONAL VISITS AND OFF-SITE EVENTS

Before undertaking any off-site events, the member of staff organising the trip or event will assess the level of first aid provision required by undertaking a suitable and sufficient risk assessment of the event and persons involved using the on-line Exeant reporting system, This will be reviewed by the Educational Visits Coordinator before the event is organised. Please refer to our separate Educational Visits Policy for more information about the school's educational visit requirements.

11. ILLNESS

When a child becomes ill during the day, the parents/carers will be contacted and asked to collect their child from school as soon as possible.

A quiet area within the offices will be set aside for withdrawal and for pupils to rest while they wait for their parents/carers to arrive to pick them up. Pupils will be monitored during this time.

12. ALLERGIC REACTIONS AND ANAPHYLAXIS

First aid arrangements for pupils, staff and visitors experiencing an allergic reaction or suspected anaphylaxis are set out in the LET Allergens Policy. Staff must follow the emergency procedures contained within that policy, including the administration of an adrenaline auto-injector where appropriate and calling 999.

Staff are aware that the school's emergency adrenaline auto-injectors are stored in the school office. All staff will receive appropriate training in recognising anaphylaxis and the use of adrenaline auto-injectors.

13. CONSENT

Parents and Carers will be asked to complete and sign a medical consent form when their child is admitted to the school or attends any visits, which includes emergency numbers, details of allergies and chronic conditions, and consent for the administration of emergency first aid – these forms will be updated periodically.

Staff always aim to act and respond to accidents and illness based on what is reasonable under the circumstances and will always act in good faith while having the best interests of the child in mind.

14. MONITORING AND REVIEW

This policy is reviewed each academic year and any changes made to this policy will be communicated to all members of staff.

All members of staff are required to familiarise themselves with this policy as part of their induction programme.

Head Injury Advice Sheet

Advice for parents and carers of children



How is your child?



RED

If your child has any of the following during the next 48 hours:

- Vomits repeatedly i.e. more than twice (at least 10 minutes between each vomit)
- Becomes confused or unaware of their surroundings
- Loses consciousness, becomes drowsy or difficult to wake
- Has a convulsion or fit
- Develops difficulty speaking or understanding what you are saying
- Develops weakness in their arms and legs or starts losing their balance
- Develops problems with their eyesight
- Has clear fluid coming out of their nose or ears
- Does not wake for feeds or cries constantly and cannot be soothed

You need urgent help

Go to the nearest Hospital Emergency (A&E) Department or phone 999



AMBER

If your child has any of the following during the next 48 hours:

- Develops a persistent headache that doesn't go away (despite painkillers such as paracetamol or ibuprofen)
- Develops a worsening headache

You need to contact a doctor or nurse today

Please ring your GP surgery or call NHS 111 - dial 111



GREEN

If your child:

- Is alert and interacts with you
- Vomits, but only up to twice
- Experiences mild headaches, struggles to concentrate, lacks appetite or has problems sleeping

If you are very concerned about these symptoms or they go on for more than 2 months, make an appointment to see your GP.

Self Care

Continue providing your child's care at home. If you are still concerned about your child, call NHS 111 – dial 111

How can I look after my child?

- Ensure that they have plenty of rest initially. A gradual return to normal activities/school is always recommended.
- Increase activities only as symptoms improve and at a manageable pace.
- It is best to avoid computer games, sporting activity and excessive exercise until all symptoms have improved.

www.what0-18.nhs.uk

This guidance is written by healthcare professionals from across Hampshire, Dorset and the Isle of Wight

Head Injury Advice Sheet

Advice for parents and carers of children



Concussion following a head injury

- Symptoms of concussion include mild headache, feeling sick (without vomiting), dizziness, bad temper, problems concentrating, difficulty remembering things, tiredness, lack of appetite or problems sleeping – these can last for a few days, weeks or even months. Some symptoms resolve quickly whilst others may take a little longer.
- Concussion can happen after a mild head injury, even if they haven't been "knocked out".
- 9 out of 10 children with concussion recover fully, but some can experience long term effects, especially if they return to sporting activities too quickly. It is really important that your child has a gradual return to normal activities and that they are assessed by a doctor before beginning activities that may result in them having another head injury.
- If you are very concerned about these symptoms or they last longer than 2 months, you should seek medical advice from your doctor.

Advice about going back to nursery / school

- Don't allow your child to return to school until you feel that they have completely recovered.
- Try not to leave your child alone at home for the first 48 hours after a significant head injury.

Advice about returning to sport

- Repeated head injury during recovery from concussion can cause long term damage to a child's brain.
- Expect to stay off sport until at least 2 weeks after symptoms are fully recovered.
- Always discuss with your child's school and sports club to discuss a gradual return to full activity.

For further information:

Rugby: goo.gl/1fsBXz



Football: goo.gl/zAgbMx



For further support and advice about head injuries, contact:



- Visit the [Brain Injury Trust website](https://www.braininjurytrust.org.uk).



www.what0-18.nhs.uk

This guidance is written by healthcare professionals from across Hampshire, Dorset and the Isle of Wight

CS45305 April 2020

APPENDIX B EYFS 2025 Update – Paediatric First Aid and Intimate Care

In line with the Early Years Foundation Stage (EYFS) Statutory Framework September 2025 the school recognises the inclusion of toileting and intimate hygiene within safeguarding and welfare requirements. To meet these requirements the school will ensure that:

- At least one member of staff with a current Paediatric First Aid (PFA) qualification is present on the premises and available at all times when children are present including during off site activities.
- All staff providing intimate care, toileting or hygiene support receive appropriate training and know how to respond to medical needs and emergencies that may occur during these routines.
- First aid provision is consistent with the school safeguarding and safety policies ensuring children's privacy, dignity, and wellbeing at all times.
- Accurate records of first aid and intimate care incidents are maintained and parents/carers are informed promptly.
- Ongoing training, supervision, and monitoring are in place to ensure staff remain confident and compliant with statutory requirements.

APPENDIX C EYFS 2025 Update – Paediatric First Aid and Meal/Snack Times

In line with the EYFS Statutory Framework September 2025 and to ensure consistency across the school the following arrangements are in place:

- EYFS requirement at least on **paediatric First Aid member of staff** is present and on site at all times and specifically during **early years meal and snack times**. This is to ensure that there are staff present who are trained to respond to choking, allergic reactions, or other medical emergencies.
- **Medical/allergy plans** are maintained for all children with specific dietary or health needs, and these are communicated clearly to catering and supervisory staff.
- **Safe eating practices** are promoted consistently across the early years (e.g. children remain seated while eating, food is cut to age-appropriate sizes and water is always available).
- All incidents occurring at meal or snack times are recorded in line with the school's First Aid Policy and parents/carers are informed promptly.